SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

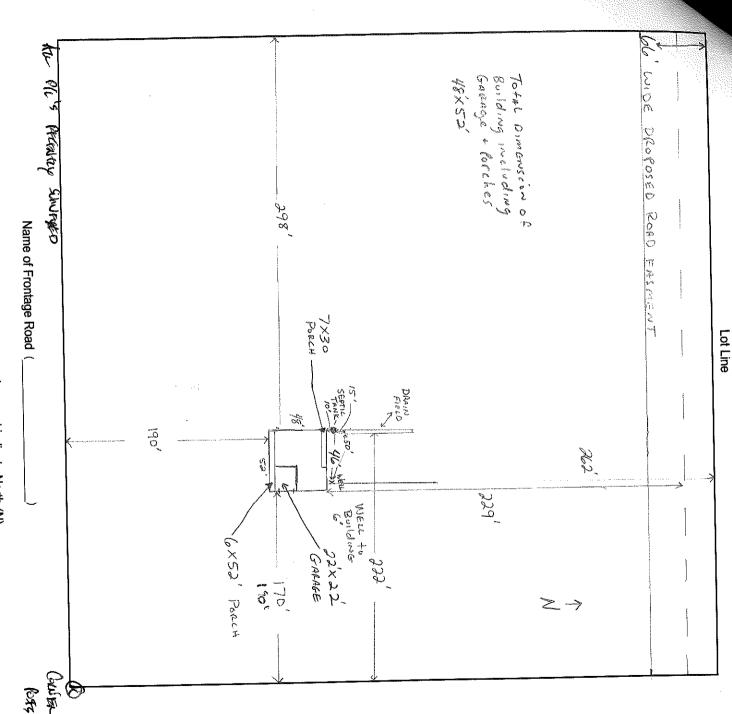
Bayfield County Zoming Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Amount Paid: 1995 Date: 10/13 Application No.: Zoning District 11-0380 舊 1664

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAV Changes in plans must be approved by the Zoning Department.

	007 13 2011
Date of Approval	_ द्रियंपीम्प्र Rec'd for Issuance Inspector
3-6-4	
Kips	Agency must be astained prior to the same of constructions
. When any western	condition:) A dillow DWELLY COE (box) Fruit There the
_ Variance (B.O.A.) #	Mitigation Plan Required: Yes 🗆 No 💆
of Inspection 10-6-LL	By DXC Date
to aware the way to want to	Inspection Record: (Males 20) GALLETONE LOCATION & PRINTING CANDITIONS
•	
ried (Date)	Date 10/13/11 Permit Number 11-0380 Permit Denied (Date)
	Permit Issued: State Sanitary Number 11-1075
(If you recently purchased the property Attach a Copy of Recorded Deed)	* See Notice on Back APPLICANT — PLEASE COMPLETE REVERSE SIDE
	Address to send permit P.O. BOX 416 Than Quier, WI. 5484
Date 10-4-11	ire) I Mark &
(cur) strowtedge and octae it is two, where and compose it ill be relied upon by Bayfield County in determining whether (v) am (are) providing in or with this application. I (we) (v) at any reasonable time for the purpose of inspection.	I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the test of my (our) knowledge and care it is two, where the control is a permit. I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have above described property at any reasonable time for the purpose of inspection.
T WILL RESULT IN PENALTIES	FAILURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
☐ External Improvements to Accessory Building (explain)	☐ Residential Accessory Building Addition (explain) ☐ External Improvements
to Principal Building (explain)	Residential Accessory Building (explain)
(explain)	☐ Residential Addition / Alteration (explain) ☐ Special/Conditional Use (explain)
ain)	Residence sq. ft. Garage sq. ft $484(22 \times 22)$ Commercial Other (explain)
huiding Addition (explain)	Deck sq. ft Deck(2) sq. ft
uilding Addition (explain)	N ** Residence wideck-porch (# of bedrooms)
ilding	
System_Conventionel	Type of Septic/Sanitary Principal Structure (# of bedrooms) Mobile Home (manufacture)
No X Number of Stories / City City	Structure: New X Addition Existing Basement: Yes New X Square Footage 7,191, Sanitary: New X
eater than 75' \(\begin{array}{cccccccccccccccccccccccccccccccccccc	ls your structure in a Shoreland Zone? Yes 🗍 No 🐧 I f yes. Distance from Shoreline: greater than 75'
ed: Yes 🗍 No 🗍	Telephone $215-292-9434$ (Home) $SAME$ (Work) Written Authorization Attached:
(Phone)	TRIN RIVER WIT. 54847 Authorized Agent
	port Rd.
(Phone) 7/5·25/2-9434	Volume Page Of Deeds Parcel I.D. Proportion MARK S. 4 JILL L. TRZUNKA Contractor SELF
Acreage 5.88	Gov't LotLot
nge 9 West Town of Albertuse	Legal Description SW 1/4 of SE 1/4 of Section 2 Township 47 North, Range
B.O.A. OTHER	LAND USE SANITARY ROPE PRIVY CONDITIONAL USE SPECIAL USE
	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.



- Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
- N Show the location, size and dimensions of the structure
- ယ Show the location, size and dimensions of attached deck(s), porch(s) or garage.
- 4 Show the location of the well, holding tank, septic tank and drain field

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-8 (a-o) COMPLETELY.

- 5 Show the location of any lake, river, stream or pond if applicable
- g Show the location of other existing structures
- Show the location of any wetlands or slopes over 20 percent.
- ∞ Show dimensions in feet on the following:
- Building to all lot lines
- Building to centerline of road
- Building to lake, river, stream or pond Holding tank to closest lot line
- NA Ω
- 4/2 Holding tank to building
- Holding tank to well

- Holding tank to lake, river, stream or pond
- 3 5 5 A
- Privy to closest lot line

- \$ 15 m Privy to building
- Privy to lake, river, stream or pond
- Septic Tank and Drain field to closest lot line

- ∄
- 9 7 Septic Tank and Drain field to building
 Septic Tank and Drain field to well
 Septic Tank, and Drain field to lake, river, stream or pond.
 Well to building

*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits

Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked